

Abstract of the Disclosure

In a method and device for monitoring a vascular access during a dialysis treatment, pressure pulses generated by a balancing device connected in a dialysis fluid inlet line and drain line are monitored in the extracorporeal blood circulation path. The pressure pulses are detected with a pressure sensor in the venous blood line and are analyzed in an analyzer unit. When there is a characteristic change in pressure pulses in the extracorporeal blood circulation path, a faulty venous access is deduced, i.e., the needle has slipped out. Upon a faulty venous access condition, an alarm generator generates an acoustic and/or optical alarm, and the blood flow in the extracorporeal circulation is interrupted.

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